



DIRECTIVE AND ORDER REGARDING NURSING HOME MATTERS

Pursuant to Executive Order No. 20-04-05-01

I, Robert R. Neall, Secretary of Health, finding it necessary for the prevention and control of 2019 Novel Coronavirus (“SARS-CoV-2” or “2019-NCov” or “COVID-19”), and for the protection of the health and safety of patients, staff, and other individuals in Maryland, hereby authorize and order the following actions for the prevention and control of this infectious and contagious disease under the Governor’s Proclamation of Catastrophic Health Emergency and the Order of the Governor of the State of Maryland No. 20-04-05-01, dated April 5, 2020, Authorizing Various Actions Related to Nursing Homes and Other Health Care Facilities. **This Directive and Order amends, replaces, and supersedes the Directive and Order Regarding Nursing Homes Matters, dated April 5, 2020.**

1. **Protecting Nursing Home Residents:** Facilities licensed under Title 19, subtitles 3 and 14 of the Health-General Article and COMAR 10.07.02 (“nursing homes”) shall immediately ensure that they are in full compliance with all [U.S. Centers for Disease Control and Prevention \(CDC\)](#)¹, [U.S. Centers for Medicare & Medicaid Services \(CMS\)](#)² and [the Maryland Department of Health \(MDH\)](#)³ guidance related to COVID-19.

Nursing homes shall check CDC, CMS, and MDH guidance daily to ensure that they are complying with the most current guidance and adjust their policies, procedures, and protocols accordingly.

2. **Protecting Nursing Home Staff:** Personal Protective Equipment (PPE): Maryland continues to prioritize nursing homes in the highest category to receive PPE.

A. All nursing homes shall use the process established by MDH to request PPE from the State: [PPE Request Form](#)⁴. All nursing home staff are required to implement the CDC’s [Strategies to Optimize the Supply of PPE and Equipment](#)⁵.

¹ https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhealthcare-facilities%2Fprevent-spread-in-long-term-care-facilities.html

² See For health care facilities: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>

³ See Resources for health care facilities: <https://coronavirus.maryland.gov/pages/hcf-resources>

⁴ <https://health.maryland.gov/mdpcp/Documents/Emergency%20PPE%20Request%20Form.pdf>

⁵ <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/>

B. All personnel who are in close contact with residents of nursing homes shall use appropriate personal protective equipment, such as masks, face shields, gloves, and gowns, based on the procedures being performed and the availability of specific forms of PPE. Facilities shall use good faith efforts to maintain adequate supplies of all types of PPE. The appropriate PPE should be worn at all times while providing care to residents in the facility, and personnel should follow [CDC guidance for using personal protective equipment](https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html)⁶. Other equipment may be used for the appropriate clinical situations, such as respirators for aerosol generating procedures; in all other cases, the staff must use a procedure or surgical mask, or the best available equipment as specified in the above CDC's Strategies to Optimize the Supply of PPE and Equipment. If a facemask must be taken off for the purposes of eating or drinking, personnel should ensure they are maintaining appropriate social distances (greater than 6 feet) from others.

3. **Outbreak Prevention and Testing:** Pursuant to a health care provider's order for COVID-19 testing, all nursing homes shall use the most expeditious means available (either a hospital lab, private lab, or the Maryland State Laboratory). This includes using either a test kit provided by the Maryland State Lab or sending their test specimens if using the nursing home's own test kit to the Maryland State Lab for COVID-19 testing of residents and staff. Maryland State Laboratory Guidance can be found [here](#)⁷.

4. **Staff Assignments:** Nursing homes shall immediately implement, to the best of their ability, the following personnel practices:

- Establish a cohort of staff who are assigned to care for known or suspected COVID-19 residents.
- Designate a room, unit, or floor of the nursing home as a separate observation area where newly admitted and readmitted residents are kept for 14 days on contact and droplet precautions while being observed every shift for signs and symptoms of COVID-19.
- Designate a room, unit, or floor of the nursing home to care for residents with known or suspected COVID-19.

5. **Right of Return for Previously Ill Residents:** Returning residents to their nursing facility, their home, remains a priority. For nursing home residents admitted or seen at a hospital for COVID-19, the residents shall be allowed to return to the nursing home as long as the facility can follow the approved [CDC recommendations for transmission-based precautions](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html)⁸. If the residents must temporarily go to other facilities, every effort must be made by the receiving and original nursing homes to transfer the residents back to their original nursing homes as soon as possible.

6. **Office of Health Care Quality:** The Office of Health Care Quality is directed to assist acute care hospitals, if necessary, in discharging patients who require nursing-home level

⁶ <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>

⁷ <https://health.maryland.gov/laboratories/Pages/Novel-Coronavirus.aspx>

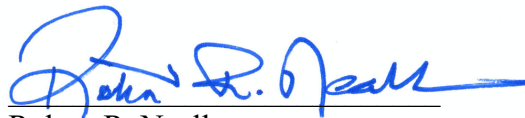
⁸ https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html#Patient_Placement

care. Hospital discharge planners who are unable to place a patient may access this service at: mdh.dischargeassist@maryland.gov

Nursing homes shall cooperate with the Office of Health Care Quality and hospitals in the placement of discharged patients.

7. **Severability:** If any provision of this Directive and Order or its application to any person, entity, or circumstance is held invalid by any court of competent jurisdiction, all other provisions or applications of this Directive and Order shall remain in effect to the extent possible without the invalid provision or application. To achieve this purpose, the provisions of this Directive and Order are severable.

THESE DIRECTIVES AND ORDERS ARE ISSUED UNDER MY HAND THIS 9TH DAY OF APRIL 2020 AND ARE EFFECTIVE IMMEDIATELY.



Robert R. Neall
Secretary